



This form should be routed for internal approvals before Lewis & Clark submits a grant proposal to an external sponsor.

Sponsor Proposal Deadline _____
Target Submission Deadline _____

1 Proposal Type: (select only one)	Required Attachments	Other Attachments
<input type="checkbox"/> New <input type="checkbox"/> Pre-Proposal <input type="checkbox"/> Renewal (of Expiring Award) <input type="checkbox"/> Resubmission (Prior Proposal #) _____ <input type="checkbox"/> Supplement (Current GL #) _____	<input type="checkbox"/> Statement of Work or Proposal narrative <input type="checkbox"/> Budget <input type="checkbox"/> Budget Justification <input type="checkbox"/> Sponsor Budget Form, if different	<input type="checkbox"/> Indirect Cost Waiver Request Form <input type="checkbox"/> Subrecipient Information Form

2 Proposal Information				
PI/PD First Last Name		Department	School	Proposal ID
Proposal Title				
Sponsor		Sponsor's Program	Prime Recipient (if LC will be a sub)	
Funding Type: <input type="checkbox"/> Federal <input type="checkbox"/> State/Local Govt <input type="checkbox"/> Private <input type="checkbox"/> Corporate	Project Purpose: <input type="checkbox"/> Award nomination <input type="checkbox"/> Research <input type="checkbox"/> Curricular <input type="checkbox"/> Programmatic <input type="checkbox"/> Other	Indirect Cost Recovery Type: <input type="checkbox"/> Full <input type="checkbox"/> Sponsor Limited <input type="checkbox"/> Waived (approved Indirect Waiver Request Form attached)	Indirect Cost Rate _____% Indirect Cost Basis: <input type="checkbox"/> MTDC Rate Agreement On campus <input type="checkbox"/> MTDC Rate Agreement Off campus <input type="checkbox"/> TDC <input type="checkbox"/> Non-standard	
Total Direct Costs		Indirect Recovery account(s)		
Indirect Costs		Indirect Split (if applicable)		
Total Request		Requested Start Date		
Cost Share		Requested End Date		

3 Compliance Requirements – Questions 1-6 should be answered by the PI		YES	NO
Human Subjects	1. Will the project outlined in this proposal involve <u>human subjects research</u>? If yes, what is the status of the IRB review? <input type="checkbox"/> Not Submitted <input type="checkbox"/> Pending <input type="checkbox"/> Approved IRB Approval No: _____ Expiration Date: _____		
Vertebrate Animals	2. Will the project outlined in this proposal involve <u>vertebrate animals</u>? If yes, what is the status of the IACUC review? <input type="checkbox"/> Not Submitted <input type="checkbox"/> Pending <input type="checkbox"/> Approved IACUC Approval No: _____ Expiration Date: _____		
Biological Safety	3. Will the project outlined in this proposal involve the use of: a) recombinant DNA or synthetic nucleic acids? b) select agents or toxins? c) infectious or etiological (disease causing) agents or potentially infectious material? If yes to any of the above, what is the status of the <u>IBC review</u> ? <input type="checkbox"/> Not Submitted <input type="checkbox"/> Pending <input type="checkbox"/> Approved IBC Approval No: _____ Expiration Date: _____		
Hazardous Materials	4. Will the project outlined in this proposal involve any <u>foreseeable hazards</u>, including but not limited to the use of hazardous chemicals or the generation of hazardous chemical waste? If yes, your signature below confirms that your lab has a written plan to manage such hazards, and that you will coordinate with all appropriate departments on campus, including, but not limited to, Facilities.		
International Activities	5. Will the project outlined in this proposal involve international activities, such as: a) Collaboration/exchange with international counterparts, overseas or in the U.S.? b) Shipment of equipment, materials, or data, or the distribution of funds to entities or individuals outside of the United States? c) International travel? If yes to any of the above, please describe and list the country(s) involved: *200 character limit _____		
Data Security	6. Will the project involve proprietary, privileged, or confidential information or materials, or restrictions on data use or publications? Please describe, including source (if applicable): *200 character limit _____		

PROPOSAL INTERNAL APPROVAL FORM (PIAF)

4

Institutional Commitments	
The proposed project includes the following commitments: <i>check all that apply. Describe specific needs and attach approvals from the appropriate budget manager or departmental representative. Committed cost share must also appear in proposal budget. (*200 character limit, or attach more info.)</i>	
<input type="checkbox"/> Faculty/Staff release time	<input type="checkbox"/> On-Campus Space or Room Renovation
<input type="checkbox"/> LC Personnel support (current or new position)	<input type="checkbox"/> Use of LC facilities, including residence halls or event space
<input type="checkbox"/> Special computing needs	<input type="checkbox"/> Conferences and Events Support
<input type="checkbox"/> Commitment of resources after the award ends	<input type="checkbox"/> Other (describe)

5

Investigator(s) and Chair(s) Commitments and Approvals					
PI and Co-Is*: By signing below, I certify that the information submitted within the application is true, complete and accurate to the best of my knowledge and that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. I agree to accept responsibility for the scientific conduct and financial management of the project and to provide the required progress reports.					
Chair(s): By signing below, I concur that the project described in the proposal is consistent with the educational and research objectives of the department/program; the department/program will provide the resources as described herein.					
PI First Last:	Department	School	PI Signature:	Date:	Department Chair Signature Date:
Co-I (1) First Last:	Department	School	Co-I (1) Signature:	Date:	Department Chair Signature Date:
Co-I (2) First Last:	Department	School	Co-I (2) Signature:	Date:	Department Chair Signature Date:
Co-I (3) First Last:	Department	School	Co-I (3) Signature:	Date:	Department Chair Signature Date:
Co-I (4) First Last:	Department	School	Co-I (4) Signature:	Date:	Department Chair Signature Date:

*Project Personnel should be limited to LC employees who meet the definition of PI or Co-I in accordance with LC and sponsor requirements.

6

Institutional Commitments and Approvals					
Proposal Development Administrator: By signing below, I agree the proposal is ready to submit.					
Post Award Administrator: By signing below, I agree my office will manage the grant, if awarded.					
Proposal Dev. Admin First Last	Proposal Dev. Admin Signature	Date	Post Award Admin First Last	Post Award Admin Signature	Date
CAS/GSEC/LAW Administrator and Dean: I concur that the project described in the proposal is consistent with the overall objectives of Lewis & Clark College and institutional concerns are resolved. The professional time allocations described therein are realistic and within Lewis & Clark College guidelines. Adequate space is available or planned for the conduct of the project. I assume responsibility for costs incurred in excess of the amount awarded by the sponsor. I authorize submission of the attached proposal.					
CAS/GSEC/LAW Admin First Last	CAS/GSEC/LAW Admin Signature	Date	CAS/GSEC/LAW Dean First Last	CAS/GSEC/LAW Dean Signature	Date
CAS/GSEC/LAW Admin (2) First Last	CAS/GSEC/LAW Admin (2) Signature	Date	CAS/GSEC/LAW Dean (2) First Last	CAS/GSEC/LAW Dean (2) Signature	Date
Director of Accounting: By signing below, I agree the figures used in the calculation of the proposed budget are appropriate, and the financial information and assurances are correct.					
CFO and VP for Operations: I authorize submission of this proposal.					
Dir. Of Accounting First Last	Director of Accounting Signature	Date	CFO First Last	CFO Signature	Date

Proposal Notes: *350 character limit

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